

Entered -03-21-01 - sb  
CL 01L0184 - GWENDOLYN BURNS


01-R-0861

CLAIM OF:

**DIMAGGIO STEFAN SPENCER**  
332 Meadowood Manor  
Lithonia, Georgia 30038

For vehicular damages alleged to have been sustained from  
construction cut in the roadway that was left in an open and unsafe  
condition on March 4, 2001 at 2500 Peachtree Road, NE.

THIS ADVERSED REPORT IS  
APPROVED

BY:   
ROSALIND RUBENS NEWELL  
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0184

Date: May 31, 2001

Claimant /Victim DIMAGGIO STEFAN SPENCER  
BY: (Atty) (Ins. Co.) \_\_\_\_\_  
Address: 332 Meadowood Manor, Lithonia, Georgia 30038  
Subrogation: \_\_\_\_\_ Claim for Property damage \$ 645.00 Bodily Injury \$ unspecified  
Date of Notice: 3/19/01 Method: Written, Proper X Improper \_\_\_\_\_  
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X  
Date of Occurrence 3/4/01 Place: 2500 Peachtree Road, NE  
Department \_\_\_\_\_ Division \_\_\_\_\_  
Employee involved \_\_\_\_\_ Disciplinary Action: \_\_\_\_\_

NATURE OF CLAIM: Claimant alleges that his vehicle sustained damage when he drove through a sink hole in the roadway that was under construction and left in an unsafe condition. An investigation determined that Atlanta Gas Light Company performed work at the incident location. The utility company has accepted liability for the damages and is currently resolving the claim.

INVESTIGATION:

Statements: City employee \_\_\_\_\_ Claimant \_\_\_\_\_ Others X Written \_\_\_\_\_ Oral \_\_\_\_\_  
Pictures \_\_\_\_\_ Diagrams \_\_\_\_\_ Reports: Police \_\_\_\_\_ Dept Report \_\_\_\_\_ Other X  
Traffic citations issued: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_  
Citation disposition: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_

BASIS OF RECOMMENDATION:

Function: Governmental \_\_\_\_\_ Ministerial \_\_\_\_\_  
Improper Notice \_\_\_\_\_ More than Six Months \_\_\_\_\_ Other X Damages reasonable \_\_\_\_\_  
City not involved X Offer rejected \_\_\_\_\_ Compromise settlement \_\_\_\_\_  
Repair/replacement by Ins. Co. \_\_\_\_\_ Repair/replacement by City Forces \_\_\_\_\_  
Claimant Negligent \_\_\_\_\_ City Negligent \_\_\_\_\_ Joint \_\_\_\_\_ Claim Abandoned \_\_\_\_\_

Respectfully submitted,

  
INVESTIGATOR - GWENDOLYN BURNS

RECOMMENDATION:

Pay \$ \_\_\_\_\_ Adverse X Account charged: 1A01 \_\_\_\_\_ 2J01 \_\_\_\_\_ 2H01 \_\_\_\_\_  
Claims Manager:  Concur/date 06-01-01  
Committee Action \_\_\_\_\_ Council Action \_\_\_\_\_

\* MY POLICE REPORT NUMBER IS: # 010631655

COUNCIL OF THE CITY OF ATLANTA  
MUNICIPAL CLERK  
City Hall  
55 Trinity Avenue, S.W.  
Atlanta, Georgia 30335

RECEIVED MAR 19 2001

RE: CLAIM FOR DAMAGES

Today's Date: 03-15-01

Dear Municipal Clerk:

ENTERED - 3-21-01 - SB  
01L0184 - GWEN BURNS

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 645.00 property and/or \$ N/A bodily injury for which I contend the City is liable.

1. Date of incident: 03/4/01 (month/day/year) 2. Time of Incident: 5:15pm 3. Police called: ✓ (REPORT ON FILE) Yes No

4. Location of incident (including street address): CORNER OF 2500 PEACHTREE ST.

5. Name of your insurance company: MARK W. INSURANCE Policy No. #GA6279268

6. State what and how incident occurred: I WAS GOING TO LENOX MALL TRAVELING FROM DOWNTOWN ATLANTA. I APPROACHED THE CORNER OF 2500 PEACHTREE STREET, AT NO IMMEDIATE OR VISUAL NOTICE. I HIT A LARGE POT HOLE, (IT BENT MY FRONT RIM AND BURST TWO NEW TIRES.)

7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: MAZDA 92 490 YZL DIMAGGIO SPENCER  
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: N/A  
(Make) (City Driver's Name) (Department/Bureau) (770)

9. Witness: FRANCISCO SPENCER 332 MEADOWOOD MAN. 987-0719  
(Name) (Address) (Telephone Number)

10. The acknowledgment of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Dimaggio S. Spencer  
Signature of Claimant

DIMAGGIO STEFAN SPENCER  
(Print Claimant's Name)

332 MEADOWOOD MANOR  
(Address)

LITHONIA, GA. 30038  
(City, State and Zip Code)

(4) 532-2145 (7) 593-9405  
(Work Number) (Home Number)

**March 15, 2001**

**DiMaggio S. Spencer  
332 Meadowood Manor  
Lithonia, GA 30038**

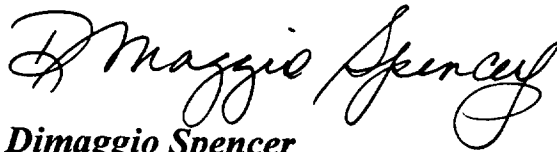
***I would like to insert additional information for this claim, for the sole purpose of honesty and proof of this claim. I purchased a brand new set of 20" chrome wheels and a set of brand new 245x35x20 tires from: "Turn Key Automotive" located at 3984 Glenwood Rd. Decatur, GA 30032. You may contact Bruce (owner) or Adrian (clerk) at 404-289-1315, between the hours of 10am-6pm Monday-Saturday. They can provide full proof of damaged wheel and re-purchase of a 2<sup>nd</sup> tire. The set of wheels costed \$1820.00 the set of tires costed \$1,100.00***

***In addition, it will cost an additional \$160.00 to have my bent Rim repaired.***

***You may contact "Wheelwizard" wheel repair specialist at 770-451-6333; I called them for an estimate.***

***In closing, I have spent \$650.00 for this incident with this pothole. Plus an additional \$160.00 to have my wheel repaired. Grand total of \$810.00!***

***Thank you,***

  
**DiMaggio Spencer**

**By signing this letter, I admit to full truth and honesty to this claim. Sole purpose of this claim is to receive reimbursement of damaged property.**